

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.L.P.E. CLASSIFIER	<i>EW</i>	<i>32</i>	<i>10/16</i>
FORMALTY REVIEW	<i>C.V.</i>	<i>9-503</i>	<i>8-6/11/10</i>
RESPONSE FORMALTY REVIEW	<i>SWP</i>	<i>1110</i>	<i>8-29-10</i>

INDEX OF CLAIMS

Rejected _____ H _____ Non-elected
 Allowed _____ I _____ (interference)
 (Through summary) Cancelled _____ A _____ Appeal
 Restricted _____ O _____ Ousted

Claim	Filed	Original	Date
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If more than 150 claims or 10 actions
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